

Montefiore Medical Center Laboratories

Ira I. Sussman, MD - Director

111 E. 210th Street, Bronx, NY 10467

CLIA#: 33D0669651

Tel: 718-920-4695

Physician: SELINA S. ZAMAN
111 EAST 210 STREET
BRONX 10467

Patient: POLANCO, LAURA P
MMC MR#: MMC-03586426
DOB: 09/27/90 Age: 22Y Sex: F
Location: NAMB MONTE NORTH AMB

Report Date: 10/24/12
Collected: 10/23/12 14:11

Request#: 12-2703759

Results			Ref. Ranges	
Urinalysis				
Color	Yellow		(Yellow)	MOS
Appearance	Clear		(Clear)	MOS
Specific Gravity	1.021		(1.001-1.035)	MOS
pH	7.0		(5.0-8.0)	MOS
Protein	30	mg/dL	(Negative)	MOS
Glucose	Negative	mg/dL	(Negative)	MOS
Ketone	Negative	mg/dL	(Negative)	MOS
Bilirubin	Negative		(Negative)	MOS
Occult Blood	Negative		(Negative)	MOS
Urobilinogen	0.2	EU	(0.1-1.0)	MOS
Nitrite	Negative		(Negative)	MOS
Leukocyte Esterase	Negative		(Negative)	MOS
Red Blood Cells	2.2	/HPF	(0-3 /HPF)	MOS
White Blood Cells	1.6	/HPF	(0-4 /HPF)	MOS
Squamous Epithelial	Few	/LPF	(Few)	MOS
Bacteria	1+	/HPF	(Negative)	MOS

Performing Labs: MOS=Moses EIN=Einstein BLH=Bronx Lebanon
AML=Quest Diagnostics-Nichols Institute, PO Box 10841, Chantilly, Virginia 20153

(** Indicates CRITICAL Values)

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Patient: POLANCO, LAURA P
MMC MR#: MMC-03586426
DOB: 09/27/90 Age: 22Y Sex: F
Location: NAMB MONTE NORTH AMB

Report Date: 10/25/12
Collected: 10/23/12 14:12

Request#: 12-2703762

	Results		Ref. Ranges	
General Chemistry				
Sodium	139	mEq/L	(135-145)	MOS
Potassium	4.1	mEq/L	(3.5-5.0)	MOS
Chloride	100	mEq/L	(98-108)	MOS
Bicarbonate	28	mEq/L	(24-30)	MOS
Glucose	81	mg/dL	(70-115)	MOS
Urea Nitrogen	14	mg/dL	(6-20)	MOS
Calcium	10.0	mg/dL	(8.5-10.5)	MOS
Creatinine	0.8	mg/dL	(0.5-1.5)	MOS
GFR Calculation	> 60	ml/min	(> 60)	MOS
RACE UNKNOWN - Female, age 22 year(s)				
If African American Female, the eGFR IDMS-Traceable is > 60 mL/min/1.73 sq.				
If Non African American Female, the eGFR IDMS-Traceable is > 60 mL/min/1.73 sq. meter				
Albumin	4.8	g/dL	(3.2-4.8)	MOS
Total Bilirubin	0.3	mg/dL	(0.2-1.2)	MOS
Direct Bilirubin	0.1	mg/dL	(0.1-0.3)	MOS
Alkaline Phosphatase	60	U/L	(42-98)	MOS
Aspartate Aminotransferase	21	U/L	(9-36)	MOS
Alanine Aminotransferase	19	U/L	(5-40)	MOS
Total Protein	7.9	g/dL	(6.0-8.5)	MOS
Complete Blood Count				
White Blood Cell Count	7.8	k/uL	(4.8-10.8)	MOS
Red Blood Cell Count	4.39	MIL/uL	(4.00-5.20)	MOS
Hemoglobin	12.9	g/dL	(12.3-15.3)	MOS
Hematocrit	39.5	%	(36.0-45.0)	MOS
MCV	90.0	fL	(80.0-96.0)	MOS
MCH	29.4	pg	(27.0-33.0)	MOS
MCHC	32.7 L	g/dL	(33.0-36.0)	MOS
RDW	12.8		(12.1-16.5)	MOS
Platelet Count	302.0	k/uL	(150.0-400.0)	MOS
NRBC (ABS)	0.00	k/uL		MOS
NRBC (%)	0.0	/100 wbc		MOS
MPV	10.2	fL	(8.0-12.0)	MOS
Auto-Differential				
Neutrophils	61	%	(40-70)	MOS
Lymphocytes	30	%	(20-50)	MOS
Monocytes	8	%	(1-8)	MOS
Eosinophils	1	%	(< 6)	MOS
Basophils	0	%	(< 3)	MOS
Neutrophil Count	4.7	k/uL	(1.8-7.7)	MOS
Lymphocyte Count	2.3	k/uL	(1.0-4.8)	MOS
Monocyte Count	0.6 H	k/uL	(0.3-0.5)	MOS
Eosinophil Count	0.1	k/uL	(0.0-0.3)	MOS
Basophil Count	0.04	k/uL	(< 0.06)	MOS
RBC Morphology				

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P041

Montefiore Medical Center Laboratories

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111 E. 210th Street, Bronx, NY 10467

CLIA#: 33D0669651

Tel: 718-920-4695

Physician: SELINA S. ZAMAN
111 EAST 210 STREET
BRONX 10467

Patient: POLANCO, LAURA P
MMC MR#: MMC-03586426
DOB: 09/27/90 Age: 22Y Sex: F
Location: NAMB MONTE NORTH AMB

Report Date: 10/25/12
Collected: 10/23/12 14:12

Request#: 12-2703762

Results		Ref. Ranges		
<hr/>				
Lipid Profile				
Cholesterol	158	mg/dL	(122-200)	MOS
Triglyceride	55	mg/dL	(36-150)	MOS
HDL-Cholesterol	64 H	mg/dL	(40-60)	MOS
LDL-Cholesterol (Calc)	83	mg/dL	(< 130)	MOS
Cholesterol-HDL Ratio	2.5		(< 5.0)	MOS
Human Immunodeficiency Virus (HIV)				
HIV-1/2 Ab (CIA)	Negative		(Negative)	MOS

Assay performed on Siemens Medical Diagnostics instrument by
chemiluminescent immunoassay.
The performance of the assay has not been established for
populations on infants or children.

Performing Labs: MOS=Moses EIN=Einstein BLH=Bronx Lebanon
AML=Quest Diagnostics-Nichols Institute, PO Box 10841, Chantilly, Virginia 20153

(** Indicates CRITICAL Values)

P042



EXTAPP

MontefiorePOLANCO, LAURA P
10/17/2012 1:23PM FC:P
27Sep1990 22 F NOMRN: 250908233
03586426 250908233**PATIENT CONSENT TO THE RELEASE OF
RECORDS FOR NYS EXTERNAL APPEAL**

Patient Information Label

The patient, the patient's designee, and the patient's provider have a right to an external appeal of certain adverse determinations made by health plans. In the event an external appeal is filed, a consent to the release of medical records, signed and dated by the patient, is necessary. An external appeal agent assigned by the New York State Insurance Department will use this consent to obtain medical information from the patient's health plan and health care providers. The name and address of the external appeal agent will be provided with the request for medical information.

I authorize my health plan and providers to release all relevant medical or treatment records related to the external appeal, including any HIV-related information, mental health treatment information, or alcohol / substance abuse treatment information, to the external appeal agent. I understand the external appeal agent will use this information solely to make a decision on the appeal and the information will be kept confidential and not released to anyone else. This release is valid for one year. I may revoke my consent at any time, except to the extent that action has been taken in reliance on it, by contacting the New York State Insurance Department in writing. I understand that my health plan cannot condition treatment, enrollment, eligibility, or payment on whether I sign this form. I acknowledge that the decision of the external appeal agent is binding. I agree not to commence a legal proceeding against the external appeal agent to review the agent's decision; provided, however, this shall not limit my right to bring an action against the external appeal agent for damages for bad faith or gross negligence, or to bring an action against my health plan.

Signature of Patient

Date

(Or the patient's representative who can consent to the release of the patient's medical records. If a parent signs for a minor child, indicate the age of the child. If a guardian or executor signs, include proof of the appointment.)

Print Name:

Laura Polanco

Patient's Health Plan ID#:

MontefiorePatient: Polanco, Laura PMRN: 03586426Pt Acct: 250908233**FINAL ED RECORD**Patient: Polanco, Laura PMailing Address: 1354 Merriam AvenueCity: BronxState: NYZip: 10452Home Ph: (347)536-1563DOB: 9/27/1990Age: 22yrSex: FAcuity: 4Mode of Arrival: WalkingMode of Departure: WalkingDisposition: HomeCondition at Dispo: Stable

Discharged With Whom: _____

Arrival Time: 10/17/2012 1:23pmDischarge Printed: 10/17/2012 3:21pm

Time Left ED: _____

CC / Curr Imp: Follow Up**Current Medications**

Medication	Dose	Route	Frequency	Last Dose	Entered
Motrin					10/17/2012 1:51pm

Allergies

Allergic Substance	Reaction	Severity
NKDA		

Vital Signs

Sys	Dia	Pulse	Resp	SAT	O2 Delivered	Temp (F)	Route	Pain Scale	Comment	Glucose	Taken at	User Name
115	68	83	18	100%	RA	98.6	oral	3/10			10/17/2012 1:53pm	Peloton, Hazel RN

RN Triage: Peloton, Hazel RN

RN Eval: _____

MD ED: Khan, Zareen MDRes/PA: Montoya, Margaret, PAPMD: Khan, Zareen R

PMD Ph: _____

Dx 1: Rib Fracture, 1 Rib, Closed**FINAL ED RECORD**

MontefiorePatient: **Polanco, Laura P**MRN: **03586426**Pt Acct: **250908233**

Pekron, Hazel RN Created: 10/17/2012 1:50pm Last Entry: 1:54pm

NURSING TRIAGE (Adult)

HPI: Pt ambulatory to triage for reevaluation of broken to L side. Was evaluated last week for same complaint states continues to have to L rib area, states increased pain when weather is cold and on movement.

PMH: (-)diabetes mellitus, (-)hypertension, (-)heart disease, (-)stroke, (-)asthma. denies

Surgeries: none

SH: no tobacco, no possible domestic violence, (-)social work referral, (-)information/education provided.

******* TRIAGE DATA:**

(-)influenza vaccine, (-)pneumonia vaccine

Last Tetanus: unknown.

LMP: 9/10/12

******* Psychosocial Assessment:**

Suicidal - no

Homicidal - no

Constant Observation - no

Have you ever tried to end your life? no

Do you feel that way now? no

******* PHYSICAL EXAM:**

GENERAL APPEARANCE: (adult) - well nourished, alert, oriented X 3, no acute distress, no obvious discomfort.

******* PREHOSPITAL CARE:** none

******* INITIAL NURSING INTERVENTIONS:** none

Falls Risk Assessment: no risk factors identified.

Patient identity verified: with patient.

Rosemary Ward, PGT Created: 10/17/2012 2:54pm Last Entry: 2:56pm

Nurse Note:

Urine Pregnancy Test - Patient Result: **negative**

Internal Control Result: ok

Manufacturer: Quidel, QuickVue One Step HCG Kit

Lot Number: 708278

Expiration Date: 2/25/2014

Montoya, Margaret, PA Created: 10/17/2012 2:44pm Last Entry: 7:27pm

PHYSICIAN H&P (Medical)

(+)Nursing Notes Reviewed

HPI: Pt is a 22 y/o female here for follow up due to pain to left sided lower ribs

pain worse with deep inspiration

pt was seen here 9/27/12: had rib series xrays confirming and non displaced left 8th rib fracture

pt given motrin PO but states it doesn't help much

pt wants to know if it healed yet

(-) sob (-) wheezing (-) nausea or vomiting (-) abd pain

no other concerns

******* ROS:** no fever, no cough, (-)SOB, (-)chest pain, (-)vomiting, in addition to the systems reviewed, all other systems reviewed are negative.

******* PMH:** no relevant PMH.

******* SH:** no tobacco, no alcohol, no drugs, lives with family, (-)information/education provided.

******* PHYSICAL EXAM:**

VITAL SIGNS: 115/66, 83, 18, 98.6 (37.0) oral temp, SaO2 100% on RA.

GENERAL APPEARANCE: alert, cooperative, no obvious discomfort.

MENTAL STATUS: speech clear, oriented X 3, responds appropriately to questions.

EYES: conjunctiva clear.

FINAL ED RECORD

Patient: **Polanco, Laura P**MRN: **03586426**Pt Acct: **250908233****Montefiore**

MOUTH: (-)decreased moisture.

THROAT: (-)injection, (-)exudates, no tonsillar inflammation, no airway obstruction.

BACK: (-)costovertebral tenderness, (+)full range of motion, no back tenderness.

HEART: normal rate, normal rhythm, normal S1, normal S2, no murmur, no rub.

LUNGS: no wheezing, no rales, no rhonchi, (-)accessory muscle use, good air exchange bilateral.

ABDOMEN: normal BS, soft, no abd tenderness, (-)guarding, no abd masses.

EXTREMITIES: no swelling\tenderness in the extremities, no edema.

SKIN: warm, dry, good color, no rash.

CHEST WALL: (-)subcutaneous emphysema, (-)paradoxical movement, no abrasions\lacerations on the chest, (-)deformity, mild tenderness to left sided lower ribs, no deformity (-) ecchymosis (-) swelling

DECISION MAKING:

Patient presents to ED with rib fracture, lungs clear on cxr during prior visit.

prior ED records reviewed.

provided with incentive spirometer and advised how to use.

Morales, Eric (HIV Educator) Created: 10/17/2012 3:12pm Last Entry: 3:12pm

MD Note:

HIV Oral Consent Patient gave verbal consent for rapid HIV Test. The seven key points of information about HIV required by th Public Health Law were discussed

Montoya, Margaret, PA Created: 10/17/2012 3:17pm Last Entry: 3:17pm

MD Note:

ucg negative

Morales, Eric (HIV Educator) Created: 10/17/2012 3:49pm Last Entry: 3:51pm

MD Note: Post counseling was done via phone with the patient and patient was informed of thier HIV Neg. results.

Montoya, Margaret, PA Created: 10/17/2012 6:03pm Last Entry: 6:03pm

Results Reviewed by ED Physician

HIV Screening Test

Lab Results: _____

Wellsoft Interface Created: 10/17/2012 3:42pm Last Entry: 3:42pm

Patient: POLANCO, LAURA P ; Date/Time: 10/17/2012 3:11pm ; 417509025

----- HIV SCREENING TEST -----

HIV SCREEN Negative Norm Negative

A "Screen +" result means that the Rapid HIV Screening test is positive. If the result is "Screen +", a confirmatory test (EIA/Western Blot) must be ordered, and a blood specimen obtained by the responsible associate. A "False +" result means that the HIV Screen was positive, but the confirmatory test was negative.

Post test counseling as required by NYS law may not have occurred yet.

Assay performed by OraQuick Advance Rapid HIV1/2 antibody test using a qualitative immunoassay. A non-reactive result does not preclude the possibility of HIV infection. In addition, clinical data has not been collected to demonstrate the performance of the OraQuick Advance Rapid HIV1/2-antibody test in persons under 12 years of age.

SPECIMEN TYPE: Saliva Norm

Rad Results: _____**FINAL ED RECORD**

P046

Montefiore

Pg 4

Patient: Polanco, Laura PMRN: 03586426Pt Acct: 250908233

Procedures

Procedure	Performed By	Entered	CPT	User Name
-----------	--------------	---------	-----	-----------

All Rows Are Empty!

Supplies Used

Supply	Used By	Quantity	Entered	Service CodeCPT	ICD-9	User Name
--------	---------	----------	---------	-----------------	-------	-----------

All Rows Are Empty!

Orders

Order	Requested	In Prog	Completed
HIV Screening Test	10/17/2012 3:11pm		10/17/2012 3:42pm

MD E-Sgntr in Wellsoft: Khan, Zareen MD 10/17/2012 2:00pm

RN E-Sgntr in Wellsoft: _____

Res/PA E-Sgntr in Wellsoft: Montoya, Margaret, PA 10/17/2012 3:21pm

FINAL ED RECORD

P047



Ped

PATIENT REGISTRATION FACESHEET

MMC MONTEFIORE NORTH DIVISION

Requested on 10/17/2012 @ 2:10p

Arrival Time: 1:23pm

Triage Time: 1:23pm

from MNEMR14

Triage Category:

Medical Record #: 03586426

Patient Name: POLANCO, LAURA P.

Account Number: 250908233

Type: E

Label: EDNORTH

Chief Complaint: follow up

Reg Date: 17OCT12

Start Date: 17OCT12

Account Type: EMERGENCY

Adm Src: EMERGENCY DEPARTMENT

Reg Time: 13:23

End Date:

Hospital Service:

Pvt Pt: N

Acct Create: JOHNSON, DAPHNE

Financial Class: P

Room/Bed:

Admit Attending MD:

Pvt Attending MD:

NO PCP AT ALL. NO PCP A MD

Referring MD:

PATIENT DEMOGRAPHIC INFORMATION:

Birth Name:

D.O.B. 27Sep1990 Age: 22

Birth Place:

SS#: Sex: F

Marital Status: SINGLE

Ethnic Origin: M

Religion: NONE

Handicapped?

Primary Lang: ENGLISH

Adv Dir:

MAILING ADDRESS:

1354 MERRIAM AVENUE

BRONX NY 10452

County: 58

Home Phone: (347)536-1563

Message Ph:

EMPLOYER:

Empl Status: EMPLOYED FULL-TI

Empl ID:

Occupation:

Empl: FEDERAL EXPRESS

Addr: 560 W. 42ND STREET

SPOUSE/GUARDIAN INFORMATION: NEW YORK NY 10021

Phone:

GUARANTOR DEMOGRAPHIC INFORMATION:

Name: POLANCO Laura

D.O.B. 27Sep1990

SS#:

Sex: F

Relation to Pt: PATIENT

MAILING ADDRESS:

1354 MERRIAM AVENUE

BRONX NY 10452

Home Phone: (347)536-1563

EMPLOYER:

Empl Status: EMPLOYED FULL-TI

Retirement Yr:

Occupation:

Empl: FEDERAL EXPRESS

Addr: 560 W. 42ND STREET

NEW YORK NY 10021

Phone:

EMERGENCY CONTACT INFORMATION:

Name:

Street/PO Box:

City/State/Zip:

Home Phone:

Message Phone:

Relationship:

ALT CONTACT 1:

POLANCO Sharline

(914)282-0868

RELATIVE (OTHER)

ALT CONTACT 2:

FIRST INSURANCE:

Ins Name: SELF PAY

Insured:

Prefix:

Policy #:

Group #:

Emp Name:

Address:

SECOND INSURANCE:

SELF PAY

THIRD INSURANCE:

SELF PAY

P048

MONTEFIORE MONTEFIORE MEDICAL CENTER NORTH
EMERGENCY DEPARTMENT
600 East 233rd Street • Bronx, NY 10466
718.920.9177

Patient: Polanco, Laura P
MRN: 03586426
Pt Acct: 250908233

DISPOSITION SUMMARY (for discharged patient)

Patient: Polanco, Laura P
Mailing Address: 1354 Merriam Avenue
City: Bronx NY 10452

Arrival Time: 10/17/2012 1:23pm
Discharge Printed: 10/17/2012 3:21pm

DOB: 9/27/1990
Home Ph: (347)536-1563
Cell/Alt Ph: _____
Disposition: Home
Condition at Dispo: Stable
Rm (last): _____

MD ED: Khan, Zareen MD
RN Eval: _____

Res/PA: Montoya, Margaret, PA

PMD: _____ PMD Ph: _____
MSG/Info: ucg
Chief Cmpnt: Follow Up

Dx 1: Rib Fracture, 1 Rib, Closed
Rx 1: Percocet Tablets (acetaminophen,oxycodone)
325mg,5mg
1 tablet by mouth every 6 hours as needed
#8(eight) tablets

Disposition

PMD/Clinic/SNF: Medicine Clinic, Adult
Montefiore North Ambulatory Care Center
Bronx NY 10466
Follow-up 1 Date: or your medical doctor

F/U MD Ph: (347) 341-4300
F/U MD Fax: _____

Other Instr: Return to the Emergency Department immediately for any worsening of symptoms including
difficulty breathing, severe pain, vomiting, bleeding or weakness.

May return to work/school: 1 Day

MY SIGNATURE BELOW INDICATES:

- > I have received and understood the oral instructions regarding my current medical problem.
- > I will arrange follow-up care as instructed above.
- > I acknowledge receipt of the written instructions as outlined on this and any previous page(s).
- I will read and review these instructions.
- > I authorize Montefiore Medical Center, the North Division to disclose information from this Emergency Department records about my identity, diagnosis, test results, and treatment, including psychiatric conditions, drug and alcohol use/dependencies; or HIV or AIDS testing or status, to (check or initial all that apply).

..... the follow-up physician listed above

This consent is valid for 90 days unless revoked in writing by me.

X.....X
Patient (or Legal Guardian) Signature _____ Signature Staff (MD/RN/PA) Signature _____

Montefiore

The University Hospital for the
Albert Einstein College of Medicine



PTACTD

MRN: 03586426
Acct #: 250908233 (E/Q)
PT Name: POLANCO, Laura
Admitting MD:
NS Room/Bed:
Service:
Admit Date: 17Oct12 13:23
Disch Date: 17Oct12 15:21

PATIENT ACTIVITY DETAIL REPORT (24HR)

Age: 22 DOB: 27Sep1990
Height (cm): 0 Weight (kg): 0
DX:
Allergies: <Please Record Allergy Status>

Isolation:

Page 1 of 1

TIME DONE DESCRIPTION / TEXT

IV RATE SITE RESULT-TXT RESULT-ANT CHARTED D/T BY

NO CHARTED ACTIONS FOUND DURING TIME PERIOD

((end of *** PATIENT ACTIVITY DETAIL REPORT (24HR) ***))

Signatures:

[any bracketed line shows older data that has been revised]

Reviewed: _____

Chart Copy

P050



POCRS

Montefiore**LABORATORY RESULTS**

*Name of ordering physician must be provided:

POLANCO, Laura P
MR# 03586426
NO/ED
P.A. Montoya

Patient Information Label

Test	Reference Ranges	Results																																													
1 Whole Blood Glucose	55-117 mg/dL (3D-6M) - 70-115 mg/dL (6M-128 Y)	mg/dL																																													
2 Hemoglobin	12.3-15.3 g/dL Female 14-17.4 g/dL Male	g/dL																																													
3 Rapid Strep A	<input type="checkbox"/> Internal Controls Acceptable	Negative	Positive																																												
4 Hemocult	<input type="checkbox"/> Internal Controls Acceptable	Negative X Number of cards <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	Positive X Number of cards <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3																																												
5 Urine Pregnancy	<input checked="" type="checkbox"/> Internal Controls Acceptable	Negative	Positive																																												
6 INR	0.9 - 1.2																																														
7	<table border="1"><thead><tr><th>HbA1c Results (Affix label Here)</th><th>Reference Range HbA1c 4.7 - 6.4%</th><th>Urinalysis* (Affix label Here)</th><th>Reference Range</th></tr></thead><tbody><tr><td></td><td></td><td></td><td>Glucose <u>Negative</u></td></tr><tr><td></td><td></td><td></td><td>Bilirubin <u>Negative</u></td></tr><tr><td></td><td></td><td></td><td>Ketone <u>Negative</u></td></tr><tr><td></td><td></td><td></td><td>Specific Gravity <u>1.001-1.035</u></td></tr><tr><td></td><td></td><td></td><td>Blood <u>Negative</u></td></tr><tr><td></td><td></td><td></td><td>pH <u>5.0-8.0</u></td></tr><tr><td></td><td></td><td></td><td>Protein <u>Negative</u></td></tr><tr><td></td><td></td><td></td><td>Urobilinogen <u>0.1-1.0</u></td></tr><tr><td></td><td></td><td></td><td>Nitrate <u>Negative</u></td></tr><tr><td></td><td></td><td></td><td>Leukocytes <u>Negative</u></td></tr></tbody></table>	HbA1c Results (Affix label Here)	Reference Range HbA1c 4.7 - 6.4%	Urinalysis* (Affix label Here)	Reference Range				Glucose <u>Negative</u>				Bilirubin <u>Negative</u>				Ketone <u>Negative</u>				Specific Gravity <u>1.001-1.035</u>				Blood <u>Negative</u>				pH <u>5.0-8.0</u>				Protein <u>Negative</u>				Urobilinogen <u>0.1-1.0</u>				Nitrate <u>Negative</u>				Leukocytes <u>Negative</u>		
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			Nitrate <u>Negative</u>																																												
			Leukocytes <u>Negative</u>																																												

Name (Print) Credentials Party Performing Test

Signature Party Performing Test

Date/Time

Montefiore

The University Hospital for the
Albert Einstein College of Medicine



DOSUM

MRN: 03586426
Acct #: 250908233 (E)
PT Name: POLANCO, Laura P.
Attending MD:
NS Room/Bed:
Service:
Admit Date: 17-Oct-2012
Disch Date: 17-Oct-2012

Discharge Order Summary

Age: 22 DOB: 27-Sep-1990 Sex:F Dept:ED
HT: ft in WT: lbs
CC:
DX:
Reason:
Allergies: <Please Record Allergy Status>;

INTERP: EN
Isolation:
Disability:

Orders	Order Mode	Status	Signed By
HIV Screening Test, once		Current Status: Comp/IE	
Specimen Type: Saliva;			
New/NW(17-Oct-2012 1511 - H)			
Ordered By: MORALES,ERIC	(Protocol)		Signed By: MORALES,ERIC

** END OF REPORT **

Montefiore

The University Hospital for the
Albert Einstein College of Medicine



MARF

MRN: 03586426
Acct #: 250908233 (E/Q)
PT Name: POLANCO, Laura P.
Admitting MD:
NS Room/Bed:
Service:
Admit Date: 17-Oct-2012
Disch Date: 17-Oct-2012

DISCHARGE MEDICATION ADMINISTRATION PROFILE

AGE: 22 DOB: 27-Sep-1990 SEX: F
HGT (CM): .00 WGT (KG): .00
CC:
DX:

INTERP: EN
ISOLATION:
ADA DISABIL:
REASON:

Page 1 of 1

<Please Record Allergy Status>

<Please Record Allergy Status>

-- NO PHARMACY ORDERS PRESENT for Patient --

*** END OF REPORT : CHT9038H ***

P053

Montefiore Medical Centers Laboratories-Wakefield Hospital

Lucia Wolgast, M.D. - Director

600 East 233rd Street, Bronx N.Y. 10466

CLIA#: 33D0712594

Tel: 718-920-9870

Physician: MD UNSPEC UNSPECIFIED

Patient: POLANCO, LAURA P

MMC MR#: MMC-03586426

DOB: 09/27/90 Age: 22Y Sex: F

Location: NOED MONTE NORTH ED

Report Date: 10/18/12

Collected: 10/17/12 15:11

Request#: 12-2652439

Results**Ref. Ranges**Specimen Type
HIV ScreenSaliva
Negative

Negative

NOR
NOR

A "Screen +" result means that the Rapid HIV Screening test is positive. If the result is "Screen +", a confirmatory test (EIA/Western Blot) must be ordered, and a blood specimen obtained by the responsible associate. A "False +" result means that the HIV Screen was positive, but the confirmatory test was negative.

Post test counseling as required by NYS law may not have occurred yet.

Assay performed by OraQuick Advance Rapid HIV1/2 antibody test using a qualitative immunoassay. A non-reactive result does not preclude the possibility of HIV infection. In addition, clinical data has not been collected to demonstrate the performance of the OraQuick Advance Rapid HIV1/2-antibody test in persons under 12 years of age.

Performing Labs: MOS=Moses EIN=Einstein BLH=Bronx-Lebanon
AML=Quest Diagnostics-Nichols Institute, PO Box 10841, Chantilly, Virginia 20153

(** Indicates CRITICAL Values)

P054

MontefiorePatient: Polanco, Laura PMRN: 03586426Pt Acct: 249959644**FINAL ED RECORD**Patient: Polanco, Laura PMailing Address: 1354 Merriam AvenueCity: BronxState: NYZip: 10452Home Ph: (347)536-1563DOB: 9/27/1990Age: 22yrSex: FAcuity: 4Mode of Arrival: WalkingMode of Departure: CarDisposition: HomeCondition at Dispo: Improved

Discharged With Whom: _____

Arrival Time: 9/27/2012 11:33amDischarge Printed: 9/27/2012 3:02pm

Time Left ED: _____

CC / Curr Imp: Assault, Assult**Current Medications**

Medication	Dose	Route	Frequency	Last Dose	Entered
none	N/A				9/27/2012 11:43am

Allergies

Allergic Substance	Reaction	Severity
NKDA		

Vital Signs

Sys	Dia	Pulse	Resp	SAT	O2 Delivered	Temp (F)	Route	Pain Scale	Comment	Glucose	Taken at	User Name
148	88	75	16	100%	RA	98.1	oral	0/10			9/27/2012 11:44am	Fisher, Juliette RN

RN Triage: Fisher, Juliette RN

RN Eval: _____

MD ED: Siegal, Jonathan MDRes/PA: Nakamura, Shashi PAPMD: Not On Staff

PMD Ph: _____

Dx 1: Rib Fracture, Closed (Unspecified)**FINAL ED RECORD**

MontefiorePatient: **Polanco, Laura P**MRN: **03586426**Pt Acct: **249959644**Dx 2: Concussion (Unspecified)

Fisher, Juliette RN Created: 9/27/2012 11:41am Last Entry: 11:43am

NURSING TRIAGE (Adult)**HPI:**

Assault - Occured 3days ago, struck multiple time(s) with fist (closed) to the right side face right side of body. States assaulted by police. (-)LOC, (-)neck pain.

***** **PMH:** No relevant PMH, (-)diabetes mellitus, (-)hypertension, (-)heart disease, (-)stroke, (-)asthma.

Surgeries: None

***** **SH:** smokes, no possible domestic violence, (-)social work referral, (-)information/education provided.

TRIAGE DATA:

(?)influenza vaccine, (-)pneumonia vaccine

Last Tetanus: unknown.

LMP: 9/10/2012

***** **Psychosocial Assessment:**

Suicidal - no

Homicidal - no

Constant Observation - no

Have you ever tried to end your life? no

Do you feel that way now? no

***** **PHYSICAL EXAM:**

GENERAL APPEARANCE: (adult) - well nourished, alert, oriented X 3, no acute distress, no obvious discomfort, (adult) - well nourished, alert, oriented X 3, no acute distress, no obvious discomfort.

***** **PREHOSPITAL CARE:** None

***** **INITIAL NURSING INTERVENTIONS:** None

Falls Risk Assessment: no risk factors identified.

Patient identity verified: with patient.

Schwartz, Abby PCT Created: 9/27/2012 1:44pm Last Entry: 1:44pm

Nurse Note:

Urine Pregnancy Test - Patient Result: negative

Internal Control Result: ok

Manufacturer: Quidel, QuickVue One Step HCG Kit

Lot Number: 708278

Expiration Date: 2/25/2014

Daniel Gerardo Created: 9/27/2012 2:43pm Last Entry: 2:44pm

Nurse Note:

Medication Given - 9/27/2012 2:44pm Toradol 60mg IM

8:10 AM 9/27/12

Nekamura, Shashi PA Created: 9/27/2012 7:17pm Last Entry: 7:38pm

PHYSICIAN H&P (Medical)

(+)Nursing Notes Reviewed

***** **HPI:** Assault - Occured 3days ago, struck multiple time(s) with fist (closed) to the body area. States assaulted by unknown individual. (+)LOC, (+)neck pain.

Complains of intermittent diffuse headache 6/10 severity, non-radiating. Took tylenol that didn't relieve her symptoms. Also complains of a LUQ rib pain on inspiration. and point tenderness of left ribs, denies LOC, nausea vomiting, blurry vision, pt was initially seen at lincoln hospital and CT was negative nothing worsens Sx. Denies nausea, vomiting, fever, chills.

nothing improves Sx.

no prior hx of similar problem.

***** **ROS:** no fever, no cough, (-)SOB, (-)chest pain, (-)nausea, (-)vomiting, in addition to the systems reviewed, all other systems reviewed are negative.

FINAL ED RECORD

P056

MontefiorePatient: **Polanco, Laura P**MRN: **03586426**Pt Acct: **249959644****PREHOSPITAL CARE:** none.**PMH:** (-)asthma, (-)CVA, (-)DM, (-)HTN, (-)CAD, (-)MI, (-)ulcer disease.**Surgeries:** none**SH:** smokes, drinks only on weekends, no drugs, lives with family, (-)information/education provided.**PHYSICAL EXAM:****VITAL SIGNS:** hypertensive.**GENERAL APPEARANCE:** well nourished, alert, cooperative, no obvious discomfort.**MENTAL STATUS:** speech clear, oriented X 3, normal affect, responds appropriately to questions.**NEURO:** motor intact, sensory intact, cerebellar function intact, reflexes intact, motor intact, sensory intact.**EYES:** PERRLA, EOMI, conjunctiva clear.**MOUTH:** (-)decreased moisture.**NECK:** supple, mild pain left lateral. No midline tenderness**BACK:** mild tenderness in scratched areas**HEART:** normal rate, normal rhythm, normal S1, normal S2, no murmur, no rub.**LUNGS:** no wheezing, no rales, no rhonchi, (-)accessory muscle use, good air exchange bilateral.**ABDOMEN:** normal BS, soft, no abd tenderness, (-)guarding, (-)rebound, no organomegaly, no abd masses.**SKIN:** warm, dry, good color, no rash, slight bruising on frontal area of the head**HEAD:** mild tenderness on the head.**EARS:** canals clear bilat, TMs clear, no discharge from ears.**CHEST WALL:** mild tenderness on the chest, palpation reproduces pain along left ribs**DECISION MAKING:**

Patient presents to ED with chief complaint and will have PREGNANCY, RIB X-RAY ordered to work-up and evaluate patient.

Additional plan for the patient includes: none

Nakamura, Shashi PA Created: 9/27/2012 2:37pm Last Entry: 2:37pm

MD Note: pt back from xray, toradol ordered

Ela, Melissa PA Created: 9/27/2012 2:50pm Last Entry: 2:50pm

Results Reviewed by ED Physician

RIBS, UNILAT WITH AP CHEST

Nakamura, Shashi PA Created: 9/27/2012 3:05pm Last Entry: 3:05pm

MD Note: pt feeling better

Patient received written and verbal instructions regarding this condition, including the following: type in f/u medicine

rx motrin

instructed to return if symptoms worsen

Lab Results: _____

Rad Results: _____

Wilson Interface Created: 9/27/2012 2:46pm Last Entry: 2:46pm

Patient: POLANCO, Laura P ; Date/Time: 9/27/2012 2:26pm ; 414625498

----- Ribs - Unilat - Inc AP Chest (PRELIMINARY RESULTS) -----

^

Laura P POLANCO, Acc: 13379598; MRN: 03586426, DOD: 9/27/2012 2:39 ^

PM.^

^

EXAMINATION: Ribs - Unilat - Inc AP Chest^

^

IMPRESSION:^

Nondisplaced fracture of the anterior lateral left eighth rib.^

^

CLINICAL INDICATION: rib pain ^

Left ribs ::assault assault^

^

INTERPRETATION:^

^

FINAL ED RECORD

P057

MontefiorePatient: Polanco, Laura PMRN: 03586426Pt Acct: 249959644

Date/Time of Examination: 9/27/2012 2:26 PM^

Comparison: None available^

Findings: ^

Four radiographs, including a single AP radiograph of the chest, of a ^
left-sided rib series demonstrate nondisplaced fracture of the left ^
anterior lateral eighth rib. This is best seen on the oblique ^
radiographs. The lungs are clear. The costophrenic sulci are sharp. ^
There is no pneumothorax. The cardiomedial contours are ^
unremarkable. ^

NOTE: Additional Information is Available in the Sections Below.

Wellsoft Interface: Created: 9/27/2012 2:45pm Last Entry: 2:45pm

Patient: POLANCO, Laura P ; Date/Time: 9/27/2012 2:26pm ; 414625498

----- Ribs - Unilat - Inc AP Chest -----

Laura P POLANCO, Acc: 13379598; MRN: 03586426, DOD: 9/27/2012 2:39 ^
PM. ^

EXAMINATION: Ribs - Unilat - Inc AP Chest ^

IMPRESSION: ^

Nondisplaced fracture of the anterior lateral left eighth rib. ^

CLINICAL INDICATION: rib pain ^

Left ribs ::assault assault ^

INTERPRETATION: ^

Date/Time of Examination: 9/27/2012 2:26 PM^

Comparison: None available^

Findings: ^

Four radiographs, including a single AP radiograph of the chest, of a ^
left-sided rib series demonstrate nondisplaced fracture of the left ^
anterior lateral eighth rib. This is best seen on the oblique ^
radiographs. The lungs are clear. The costophrenic sulci are sharp. ^
There is no pneumothorax. The cardiomedial contours are ^
unremarkable. ^

Procedures

Procedure	Performed By	Entered	CPT	User Name
-----------	--------------	---------	-----	-----------

All Rows Are Empty!

Supplies Used

Supply	Used By	Quantity	Entered	Service CodeCPT	ICD-9	User Name
--------	---------	----------	---------	-----------------	-------	-----------

All Rows Are Empty!

FINAL ED RECORD

P058

MontefiorePatient: Polanco, Laura PMRN: 03586426Pt Acct: 249959644

Orders

Order	Requested	In Prog	Completed
RIBS, UNILAT WITH AP CHEST	9/27/2012 1:43pm	9/27/2012 1:56pm	9/27/2012 2:46pm

MD E-Sgnt in Wellsoft: Siegal, Jonathan MD 9/27/2012 1:48pm

RN E-Sgnt in Wellsoft: _____

Res/PA E-Sgnt in Wellsoft: Nakamura, Shashi PA 9/27/2012 3:02pm

FINAL ED RECORD

P059



PATIENT REGISTRATION FACESHEET

MMC MONTEFIORE NORTH DIVISION

Requested on 09/27/2012 @ 12:00

Arrival Time: 11:33am

Triage Time: 11:33am

from MNEMR23

Triage Category:

Medical Record #: 03586426

Patient Name: POLANCO, LAURA P.

Account Number: 249959644

Type: E

Label: EDNORTH

Chief Complaint: assault assault

Reg Date: 27SEP12

Start Date: 27SEP12

Account Type: EMERGENCY

Adm Src: EMERGENCY DEPARTMENT

Reg Time: 11:33

End Date:

Hospital Service:

Pvt Pt: N

Acct Create: VILA, JOANNE

Financial Class: P

Room/Bed:

Admit Attending MD:

Pvt Attending MD:

NO PCP AT ALL, NO PCP A MD

Referring MD:

PATIENT DEMOGRAPHIC INFORMATION:

Birth Name:

D.O.B. 27Sep1990 Age: 22

Birth Place:

SS#: Sex: F

Marital Status: SINGLE

Ethnic Origin: M

Religion: NONE

Handicapped?

Primary Lang: ENGLISH

Adv Dir:

MAILING ADDRESS:

1354 MERRIAM AVENUE

BRONX NY 10452

County: 58

Home Phone: (347)536-1563

Message Ph:

EMPLOYER:

Empl Status: EMPLOYED FULL-TI

Empl ID:

Occupation:

Empl: Federal Express

Addr: 560 W. 42nd Street

SPOUSE/GUARDIAN INFORMATION: New York NY 10021

Phone:

GUARANTOR DEMOGRAPHIC INFORMATION:

Name: POLANCO Laura

D.O.B. 27Sep1990

SS#:

Sex: F

Relation to Pt: PATIENT

MAILING ADDRESS:

1354 MERRIAM AVENUE

BRONX NY 10452

Home Phone: (347)536-1563

EMPLOYER:

Empl Status: EMPLOYED FULL-TI

Retirement Yr:

Occupation:

Empl: Federal Express

Addr: 560 W. 42nd Street

New York NY 10021

Phone:

EMERGENCY CONTACT INFORMATION:

Name:

Street/PO Box:

City/State/Zip:

Home Phone:

Message Phone:

Relationship:

ALT CONTACT 1:

POLANCO Sharline

(914)282-0868

RELATIVE (OTHER)

ALT CONTACT 2:

FIRST INSURANCE:

Ins Name: SELF PAY

Insured:

Prefix:

Policy #:

Group #:

Emp Name:

Address:

SECOND INSURANCE:

SELF PAY

THIRD INSURANCE:

SELF PAY

MONTEFIORE MONTEFIORE MEDICAL CENTER NORTH



EMERGENCY DEPARTMENT

600 East 233rd Street • Bronx, NY 10466
718.920.9177Patient: Polanco, Laura PMRN: 03586426Pt Acct: 249959644

DISPOSITION SUMMARY (for discharged patient)

Patient: Polanco, Laura PMailing Address: 1354 Merriam AvenueCity: Bronx NY 10452Arrival Time: 9/27/2012 11:33amDischarge Printed: 9/27/2012 3:02pmDOB: 9/27/1990Home Ph: (347)536-1563

Cell/Alt Ph: _____

Disposition: HomeCondition at Dispo: Improved

Rm (last): _____

MD ED: Siegal, Jonathan MDRes/PA: Nakamura, Shashi PA

RN Eval: _____

PMD: Not On Staff

PMD Ph: _____

Chief Cmpnt: AssaultDx 1: Rib Fracture, Closed (Unspecified)Dx 2: Concussion (Unspecified)Rx 1: Motrin Tablets (ibuprofen)600mg1 tablet by mouth every 8 hours as needed with food#30 tablets

Disposition

PMD/Clinic/SNF: Medicine Clinic, AdultF/U MD Ph: (347) 341-4300Montefiore North Ambulatory Care Center

F/U MD Fax: _____

Bronx NY 10466

Follow-up 1 Date: _____

Other Instr: Return to the Emergency Department immediately for any worsening of symptoms including difficulty breathing, severe pain, vomiting, bleeding or weakness.May return to work/school: 1-2 Days

MY SIGNATURE BELOW INDICATES:

- > I have received and understood the oral instructions regarding my current medical problem.
- > I will arrange follow-up care as instructed above.
- > I acknowledge receipt of the written instructions as outlined on this and any previous page(s).
- I will read and review these instructions.
- > I authorize Montefiore Medical Center, the North Division to disclose information from this Emergency Department records about my identity, diagnosis, test results, and treatment, including psychiatric conditions, drug and alcohol use/dependencies; or HIV or AIDS testing or status, to (check or initial all that apply).

..... the follow-up physician listed above

This consent is valid for 90 days unless revoked in writing by me.

X. _____

Patient (or Legal Guardian) Signature

X. _____

Signature Staff (MD/RN/PA) Signature

Montefiore

The University Hospital for the
Albert Einstein College of Medicine



PTACTD

MRN: 03586426
Acct #: 249959644 (E/X)
PT Name: POLANCO, Laura
Admitting MD:
NS Room/Bed:
Service:
Admit Date: 27Sep12 11:33
Disch Date: 27Sep12 15:02

PATIENT ACTIVITY DETAIL REPORT (24HR)

Age: 22 DOB: 27Sep1990
Height (cm): 0 Weight (kg): 0
DX:
Allergies: <Please Record Allergy Status>

Isolation:

Page 1 of 1

TIME DONE DESCRIPTION / TEXT

IV RATE SITE RESULT-TXT RESULT-AMT CHARTED D/T BY

NO CHARTED ACTIONS FOUND DURING TIME PERIOD

((end of *** PATIENT ACTIVITY DETAIL REPORT (24HR) ***))

Signatures:

[any bracketed line shows older data that has been revised]

Reviewed: _____

Chart Copy

P062

Montefiore - North Division

600 East 233rd Street
Bronx, NY 10466
Department of Radiology

DOS: 09/27/2012 ACC # 13379598-F MR # 03586426 Visit # 249959644
Dictated: 9/27/2012 2:45:00PM Patient POLANCO, Laura P
Location: ER DOB 9/27/1990

Requested By: SIEGAL, JONATHAN H, MD
Radiologist: LEE, TONY T MD

EXAM: Ribs - Unilat - Inc AP Chest

Laura P POLANCO, Acc: 13379598; MRN: 03586426, DOD: 9/27/2012 2:39 PM.

EXAMINATION: Ribs - Unilat - Inc AP Chest

IMPRESSION:

Nondisplaced fracture of the anterior lateral left eighth rib.

CLINICAL INDICATION: rib pain Left ribs ::assault assault

INTERPRETATION:

Date/Time of Examination:9/27/2012 2:26 PM

Comparison: None available

Findings:

Four radiographs, including a single AP radiograph of the chest, of a left-sided rib series demonstrate nondisplaced fracture of the left anterior lateral eighth rib. This is best seen on the oblique radiographs. The lungs are clear. The costophrenic sulci are sharp. There is no pneumothorax. The cardiomedial contours are unremarkable.

Approved By: LEE,TONY

On: 9/27/2012 2:45:54PM

JONATHAN SIEGAL H, MD
600 EAST 233RD STREET
BRONX, NY 10466

Confidential Patient Information

DIAG

Page 1 of 1

P063



POCRS

Montefiore

POLANCO, LAURA P
09/27/2012 11:33AM FC:P
27Sep1990 22 FMRN 249959644
03586426 249959644

LABORATORY RESULTS

*Name of ordering
physician must be provided:

Dr. Sigal, Jonathan MD

Patient Information/Label

Test	Reference Ranges	Results																																													
1 Whole Blood Glucose	55-117 mg/dL (3D-6M) - 70-115 mg/dL (6M-128 Y)	mg/dL																																													
2 Hemoglobin	12.3-15.3 g/dL Female 14-17.4 g/dL Male	g/dL																																													
3 Rapid Strep A	<input type="checkbox"/> Internal Controls Acceptable	Negative	Positive																																												
4 Hemocult	<input type="checkbox"/> Internal Controls Acceptable	Negative X Number of cards <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	Positive X Number of cards <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3																																												
5 Urine Pregnancy	<input checked="" type="checkbox"/> Internal Controls Acceptable	Negative	Positive																																												
6 INR	0.9 - 1.2																																														
7	<table border="1"><thead><tr><th>HbA1c Results (Affix label Here)</th><th>Reference Range HbA1c 4.7 - 6.4%</th><th>Urinalysis* (Affix label Here)</th><th>Reference Range</th></tr></thead><tbody><tr><td></td><td></td><td></td><td>Glucose Negative</td></tr><tr><td></td><td></td><td></td><td>Bilirubin Negative</td></tr><tr><td></td><td></td><td></td><td>Ketone Negative</td></tr><tr><td></td><td></td><td></td><td>Specific Gravity 1.001-1.035</td></tr><tr><td></td><td></td><td></td><td>Blood Negative</td></tr><tr><td></td><td></td><td></td><td>pH 5.0-8.0</td></tr><tr><td></td><td></td><td></td><td>Protein Negative</td></tr><tr><td></td><td></td><td></td><td>Urobilinogen 0.1-1.0</td></tr><tr><td></td><td></td><td></td><td>Nitrate Negative</td></tr><tr><td></td><td></td><td></td><td>Leukocytes Negative</td></tr></tbody></table>	HbA1c Results (Affix label Here)	Reference Range HbA1c 4.7 - 6.4%	Urinalysis* (Affix label Here)	Reference Range				Glucose Negative				Bilirubin Negative				Ketone Negative				Specific Gravity 1.001-1.035				Blood Negative				pH 5.0-8.0				Protein Negative				Urobilinogen 0.1-1.0				Nitrate Negative				Leukocytes Negative		
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			pH 5.0-8.0																																												
			Protein Negative																																												
			Urobilinogen 0.1-1.0																																												
			Nitrate Negative																																												
			Leukocytes Negative																																												

Name (Print) Credentials Party Performing Test

Signature Party Performing Test

Date/Time

POLANCO, LAURA F
09/27/2012 11:33AM FC:P
27Sep1990 22 F
MRN: 249959644
03586426 249959644

[illegible]

Shashi Karia Nakamura, RPA-C
NYS Lic. #010527-1
DEA# _____

Montefiore

The University Hospital for the
Albert Einstein College of Medicine



DOSUM

MRN: 03586426
Acct #: 249959644 (E)
PT Name: POLANCO, Laura P.
Attending MD:
N8 Room/Bed:
Service:
Admit Date: 27-Sep-2012
Disch Date: 27-Sep-2012

Discharge Order Summary

Age: 22 DOB: 27-Sep-1990 Sex:F Dept:ED
HT: ft in WT: lbs
CC:
DX:
Reason:
Allergies: <Please Record Allergy Status>;

INTERP: EN
Isolation:
Disability:

Orders	Order Mode	Status	Signed By
RIBS, UNILAT WITH AP CHEST, 1, once Pain Site: rib pain; Clinical Info:; Clinical Info:; New/NW(27-Sep-2012 1344 - H) Ordered By: SAUNDERS,TATIANA PA	(Electronic)	Current Status: Comp/IE	Signed By: SAUNDERS,TATIANA PA

** END OF REPORT **

P066

Montefiore

The University Hospital for the
Albert Einstein College of Medicine



MARF

MRN: 03586426
Acct #: 249959644 (E/X)
PT Name: POLANCO, Laura P.
Admitting MD:
NS Room/Bed:
Service:
Admit Date: 27-Sep-2012
Disch Date: 27-Sep-2012

DISCHARGE MEDICATION ADMINISTRATION PROFILE

AGE: 22 DOB: 27-Sep-1990 SEX: F
HGT (CM): .00 WGT (KG): .00
CC:
DX:

INTERP: EN
ISOLATION:
ADA DISABIL:
REASON:

Page 1 of 1

<Please Record Allergy Status>

<Please Record Allergy Status>

-- NO PHARMACY ORDERS PRESENT for Patient --

*** END OF REPORT : CHT9038H ***

P067

Montefiore

Montefiore

111 210th Street Bronx, NY 10467
7189206266 Fax: 000-000-1234

March 20, 2014

Page 1

Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

10/31/2012 - Office Visit: Internal Medicine visit

Provider: Hosnara Jinnat, MD

Location of Care: Wakefield Ambulatory Care Center

Visit Type: Follow-up Visit

Primary Provider: Dr. Jinnat

CC: Pain on the left side of the chest.

History of Present Illness:

22 year old female with no significant past medical history came to the clinic, complaining of the pain on the left side of the chest and also for the follow up of the lab results. She saying pain is better when she takes the pain medication and the pain is increases when she takes deep breath. she had a fracture of rib on the left side. Denies cough, fever, chills, shortness of breath. Denies any other complains.

Preventative Care

All active prescriptions have been evaluated and reviewed with the patient.

Orders Created Today

99212 Ofc Vst, Est Level II [CPT-99212]

Psychiatry []

Gynecology []

Past Medical History:

Reviewed history from 10/22/2012 and no changes required:
none

Past Surgical History:

Reviewed history from 10/22/2012 and no changes required:
none

Family History:

Reviewed history from 10/22/2012 and no changes required:
Father had colon cancer at the age of 74.

Social History:

Reviewed history from 10/22/2012 and no changes required:
Lives alone.
Works in Fedex office.
Smokes cigarettes

Montefiore

Montefiore

111 210th Street Bronx, NY 10467
7189206266 Fax: 000-000-1234

March 20, 2014

Page 2

Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

No alcohol use

No drugs

Medication Reconciliation Done

Current Allergies (reviewed today):

No known allergies

Risk Factors:

Tobacco use: Current: smokes every day

Cigarettes: yes -- 1-2 pack(s) per day

Last HIV Testing Done: 10/23/2012

HIV testing refused

Fall screening:

Have you fallen in the last 3 month? no

Weight Screening

Any unexplained weight LOSS in the last 3 months? yes

Any unexplained weight GAIN in the last 3 months? no

Abuse screening:

Is there a person in your life who is hurting, threatening or frightening you? no

PHQ-2 Depression screening

Over the past two weeks, how often have you been bothered by any of the following problems?

1.Little interest or pleasure in doing things: 1

2.Feeling down, depressed , or hopeless: 2

Total point score: 3

PHQ-9 Depression screening

Over the past two weeks, how often have you been bothered by any of the following problems?

1.Little interest or pleasure in doing things: 1

2.Feeling down, depressed , or hopeless: 2

3.Trouble falling asleep or staying asleep, or sleeping too much: 1

4.Feeling tired or having little energy: 0

5.Poor appetite or overeating: 0

6.Feeling bad about yourself or that you are a failure or have let yourself or your family down: 0

7.Trouble concentrating on things such as reading the newspaper or watching television: 0

8.Moving or speaking so slowly that other people have noticed. Or the opposite-being so fidgety or restless that you have been moving around a lot more than usual: 0

9.Thoughts that you would be better off dead or of hurting yourself in some way: 0

Total point score: 4

Montefiore

Montefiore

111 210th Street Bronx, NY 10467
7189206266 Fax: 000-000-1234

March 20, 2014

Page 3

Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

Review of Systems

General

Complains of weight loss.

Denies fever, chills, and fatigue.

Eyes

Denies blurring, diplopia, vision loss, and eye pain.

ENT

Denies earache and ear discharge.

CV

Denies chest pains, palpitations, and dyspnea on exertion.

Resp

Denies dyspnea at rest, cough, and wheezing.

GI

Denies nausea, vomiting, diarrhea, and constipation.

GU

Denies urinary burning, blood in urine, and urinary frequency.

MS

Denies joint pain / LOM, joint swelling, joint stiffness, and muscle cramps.

Vital Signs:

Patient Profile: 22 Years Old Female

Height: 69 inches (175.26 cm)

Weight: 132.99 pounds (60.45 kg)

(Measured Weight: 133lbs. 0oz.)

BMI: 19.71

Temp: 98 degrees F (36.67 degrees C) oral

Pulse rate: 78 / minute

Resp: 15 per minute

BP sitting: 112 / 71 (left arm)

Cuff size: regular

Pt. in pain? no

Vitals Entered By: Marsha Johnson, LPN (October 31, 2012 2:46 PM)

Tobacco Use: Current: smokes every day

P070

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Page 4

Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

Physical Exam

General:

well developed, well nourished, in no acute distress

Head:

normocephalic and atraumatic

Lungs:

clear to auscultation; no crackles, rhonchi, or wheezing

Heart:

regular rate and rhythm with no murmurs, rubs or gallops

Abdomen:

normal bowel sounds, soft, non-tender and non-distended without masses, organomegaly

Extremities:

no clubbing, cyanosis, edema, or deformity noted with full range of motion.

Neurologic:

Alert & oriented X 3, remainder grossly intact

Impression & Recommendations:

Problem # 1: FRACTURE, RIB, LEFT (ICD-807.00)

Patient still complaining of the pain on the left side of the chest, says the pain is the same as before. She is taking tylenol and motrin. As per her she is getting relief from the pain when she takes the pain meds

Problem # 2: UNSPECIFIED EPISODIC MOOD DISORDER (ICD-296.90)

patient feels depressed several days in a week. She is saying she is feeling depressed since her father died. She denies any suicidal ideation or hurting others. will refer the patient to the Psychiatrist.

Orders:

Psychiatry ()

Problem # 3: CIGARETT/TOBACCO USER (ICD-305.1)

During the last visit she was given Nicotine patch to help her to stop the smoking but patient is not using the patch and she still smoking. Counseled the patient regarding the smoking and it's adverse effects. Patient agreed to use the Nicotine patch.

Her updated medication list for this problem includes:

Nicotine 14 Mg/24hr Pt24 (Nicotine) Take one patch transdermally once daily

Other Orders:

Gynecology ()

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Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

Osteoporosis Risk Assessment:

Risk Factors for Fracture or Low Bone Density:

Hx of Fractures:

yes

Smoking status:

Current: smokes every day

Immunization & Chemoprophylaxis:

Influenza vaccine: Fluarix (10/22/2012)

Current list of medications (including those ordered today):

- 1) NICOTINE 14 MG/24HR PT24 (NICOTINE) take one patch transdermally once daily
- 2) TYLENOL 325 MG TABS (ACETAMINOPHEN) 2 by mouth every 4 hours as needed

Patient Instructions:

Make appointment in 6 months.

.....Chandu Siripuram, MD PGY-1 October 31, 2012 3:11 PM

Precepted by:Dr. Jinnat

I discussed this patient with the resident at the time of the visit. We discussed the patient's history and exam. Further, I was present in the exam room and repeated key portions of the visit myself. We jointly arrived at an assessment and plan, and I am in agreement with that plan.

Hosnara Jinnat, MD October 31, 2012 3:24 PM

Electronically Signed by Hosnara Jinnat, MD on 11/01/2012 at 12:54 PM

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Page 1

Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

10/23/2012 - Lab Report: HIV-1/2 AB (CIA)

Provider: Selina Zaman, MD

Location of Care: Wakefield Ambulatory Care Center

Patient: LAURA P POLANCO

ID: MMCLAB 03586426

Note: All result statuses are Final unless otherwise noted.

Tests: (1) HIV-1/2 AB (CIA) (HIV-1/2 AB (CIA))

HIV-1/2 AB (CIA)

Negative

Negative

MO

Assay performed on Siemens Medical Diagnostics instrument by chemiluminescent immunoassay.

The performance of the assay has not been established for populations on infants or children.

Note: An exclamation mark (!) indicates a result that was not dispersed into the flowsheet.

Document Creation Date: 10/24/2012 4:17 PM

(1) Order result status: Final

Collection or observation date-time: 10/23/2012 14:12:00

Requested date-time: 10/23/2012 14:12

Receipt date-time: 10/23/2012 14:12

Reported date-time:

Referring Physician:

Ordering Physician: SELINA ZAMAN (26824)

Specimen Source:

Source: MMCLAB

Filler Order Number: 12-2703762-VQA-0 GGGLAB

Lab site: 122703762

Electronically Signed by Selina Zaman, MD on 10/25/2012 at 10:27 AM

P073

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Page 1

Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

10/23/2012 - Lab Report: LIPID PROFILE

Provider: Selina Zaman, MD

Location of Care: Wakefield Ambulatory Care Center

Patient: LAURA P POLANCO

ID: MMCLAB 03586426

Note: All result statuses are Final unless otherwise noted.

Tests: (1) LIPID PROFILE (LIPID PROFILE)

CHOLESTEROL	158 mg/dL	122-200	MO
TRIGLYCERIDES	55 mg/dL	36-150	MO
HDL-CHOLESTEROL [H]	64 mg/dL	40-60	MO
LDL-CHOLESTEROL CALC	83 mg/dL	< 130	MO
CHOL/HDL RATIO	2.5	< 5.0	MO

Note: An exclamation mark (!) indicates a result that was not dispersed into the flowsheet.

Document Creation Date: 10/23/2012 11:02 PM

(1) Order result status: Final

Collection or observation date-time: 10/23/2012 14:12:00

Requested date-time: 10/23/2012 14:12

Receipt date-time: 10/23/2012 14:12

Reported date-time:

Referring Physician:

Ordering Physician: SELINA ZAMAN (26824)

Specimen Source:

Source: MMCLAB

Filler Order Number: 12-2703762-LIP-0 GGGLAB

Lab site: 122703762

Electronically Signed by Selina Zaman, MD on 10/24/2012 at 10:12 AM

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Page 1

Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

10/23/2012 - Lab Report: LIVER TESTS

Provider: Selina Zaman, MD

Location of Care: Wakefield Ambulatory Care Center

Patient: LAURA P POLANCO

ID: MMCLAB 03586426

Note: All result statuses are Final unless otherwise noted.

Tests: (1) LIVER TESTS (LIVER TESTS)

ALBUMIN	4.8 g/dL	3.2-4.8	MO
BILIRUBIN TOTAL	0.3 mg/dL	0.2-1.2	MO
BILIRUBIN DIRECT	0.1 mg/dL	0.1-0.3	MO
ALKALINE PHOS	60 U/L	42-98	MO
SGOT	21 U/L	9-36	MO
SGPT	19 U/L	5-40	MO
TOTAL PROTEIN	7.9 g/dL	6.0-8.5	MO

Note: An exclamation mark (!) indicates a result that was not dispersed into the flowsheet.

Document Creation Date: 10/23/2012 11:02 PM

(1) Order result status: Final

Collection or observation date-time: 10/23/2012 14:12:00

Requested date-time: 10/23/2012 14:12

Receipt date-time: 10/23/2012 14:12

Reported date-time:

Referring Physician:

Ordering Physician: SELINA ZAMAN (26824)

Specimen Source:

Source: MMCLAB

Filler Order Number: 12-2703762-LFT-0 GGGLAB

Lab site: 122703762

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Page 1

Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

10/23/2012 - Lab Report: BASIC METAB PANEL

Provider: Selina Zaman, MD

Location of Care: Wakefield Ambulatory Care Center

Patient: LAURA P POLANCO

ID: MMCLAB 03586426

Note: All result statuses are Final unless otherwise noted.

Tests: (1) BASIC METAB PANEL (BASIC METAB PANEL)

SODIUM	139 mEq/L	135-145	MO
POTASSIUM	4.1 mEq/L	3.5-5.0	MO
CHLORIDE	100 mEq/L	98-108	MO
CO2	28 mEq/L	24-30	MO
GLUCOSE	81 mg/dL	70-115	MO
UREA NITROGEN	14 mg/dL	6-20	MO
CALCIUM	10.0 mg/dL	8.5-10.5	MO
CREATININE	0.8 mg/dL	0.5-1.5	MO
GFR CALCULATION	> 60 ml/min	> 60	MO

RACE UNKNOWN - Female, age 22 year(s)

If African American Female, the eGFR IDMS-Traceable is > 60 mL/min/1.73

sq.

If Non African American Female, the eGFR IDMS-Traceable is > 60

mL/min/1.73

sq.meter

Note: An exclamation mark (!) indicates a result that was not dispersed into the flowsheet.

Document Creation Date: 10/23/2012 11:02 PM

(1) Order result status: Final

Collection or observation date-time: 10/23/2012 14:12:00

Requested date-time: 10/23/2012 14:12

Receipt date-time: 10/23/2012 14:12

Reported date-time:

Referring Physician:

Ordering Physician: SELINA ZAMAN (26824)

Specimen Source:

Source: MMCLAB

Filler Order Number: 12-2703762-CH7-0 GGGLAB

Lab site: 122703762

The following non-numeric lab results were dispersed to the flowsheet even though numeric results were expected:

GFR CALCULATION, > 60

Electronically Signed by Selina Zaman, MD on 10/24/2012 at 10:18 AM

P076

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Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

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Page 1

Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

10/23/2012 - Lab Report: CBC

Provider: Selina Zaman, MD

Location of Care: Wakefield Ambulatory Care Center

Patient: LAURA P POLANCO

ID: MMCLAB 03586426

Note: All result statuses are Final unless otherwise noted.

Tests: (1) CBC (CBC)

WBC	7.8 k/uL	4.8-10.8	MO
RBC	4.39 MIL/uL	4.00-5.20	MO
HEMOGLOBIN	12.9 g/dL	12.3-15.3	MO
HEMATOCRIT	39.5 %	36.0-45.0	MO
MCV	90.0 fL	80.0-96.0	MO
MCH	29.4 pg	27.0-33.0	MO
MCHC	[L] 32.7 g/dL	33.0-36.0	MO
MPV	10.2 fL	8.0-12.0	MO
PLATELET-COUNT	302.0 k/uL	150.0-400.0	MO
GRAN %	61 %	40-70	MO
LYMPH %	30 %	20-50	MO
MONO %	8 %	1-8	MO
EOS %	1 %	< 6	MO
BASO %	0 %	< 3	MO
GRAN COUNT	4.7 k/uL	1.8-7.7	MO
LYMPH COUNT	2.3 k/uL	1.0-4.8	MO
MONO COUNT	[H] 0.6 k/uL	0.3-0.5	MO
EOS COUNT	0.1 k/uL	0.0-0.3	MO
BASO COUNT	0.04 k/uL	< 0.06	MO
RDW	12.8	12.1-16.5	MO
! NRBC (%)	0.0 /100 wbc		MO
! NRBC (ABS)	0.00 k/uL		MO

Note: An exclamation mark (!) indicates a result that was not dispersed into the flowsheet.

Document Creation Date: 10/23/2012 9:52 PM

(1) Order result status: Final

Collection or observation date-time: 10/23/2012 14:12:00

Requested date-time: 10/23/2012 14:12

Receipt date-time: 10/23/2012 14:12

Reported date-time:

Referring Physician:

Ordering Physician: SELINA ZAMAN (26824)

Specimen Source:

Source: MMCLAB

Filler Order Number: 12-2703762-CBC-0 GGGLAB

Lab site: 122703762

P078

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Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

The following lab values were dispersed to the flowsheet
with no units conversion:

RBC, 4.39 MIL/UL, (F) expected units: M/uL

The following results were not dispersed to the flowsheet:

NRBC (%), 0.0 /100 wbc, (F)

NRBC (ABS), 0.00 k/uL, (F)

Electronically Signed by Selina Zaman, MD on 10/29/2012 at 10:10 AM

P079

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Page 1

Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

10/23/2012 - Lab Report: URINALYSIS,MICRO

Provider: Selina Zaman, MD

Location of Care: Wakefield Ambulatory Care Center

Patient: LAURA P POLANCO

ID: MMCLAB 03586426

Note: All result statuses are Final unless otherwise noted.

Tests: (1) URINALYSIS,MICRO (URINALYSIS,MICRO)

RBC, URINE	2.2 /HPF	0-3 /HPF	MO
WBC, URINE	1.6 /HPF	0-4 /HPF	MO
SQ EPITH. CELLS	Few /LPF	Few	MO
BACTERIA	1+ /HPF	Negative	MO

Note: An exclamation mark (!) indicates a result that was not dispersed into the flowsheet.

Document Creation Date: 10/24/2012 1:29 AM

(1) Order result status: Final

Collection or observation date-time: 10/23/2012 14:11:00

Requested date-time: 10/23/2012 14:11

Receipt date-time: 10/23/2012 14:11

Reported date-time:

Referring Physician:

Ordering Physician: SELINA ZAMAN (26824)

Specimen Source:

Source: MMCLAB

Filler Order Number: 12-2703759-UAM-0 GGGLAB

Lab site: 122703759

The following lab values were dispersed to the flowsheet with no units conversion:

WBC, URINE, 1.6 /HPF, (F) expected units: cells/hpf

The following non-numeric lab results were dispersed to the flowsheet even though numeric results were expected:

BACTERIA, 1+

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Page 1

Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

10/23/2012 - Lab Report: URINALYSIS

Provider: Selina Zaman, MD

Location of Care: Wakefield Ambulatory Care Center

Patient: LAURA P POLANCO

ID: MMCLAB 03586426

Note: All result statuses are Final unless otherwise noted.

Tests: (1) URINALYSIS (URINALYSIS)

COLOR, URINE	Yellow	Yellow	MO
APPEARANCE, URINE	Clear	Clear	MO
SPECIFIC GRAVITY	1.021	1.001-1.035	MO
PH, URINE	7.0	5.0-8.0	MO
PROTEIN, URINE	30 mg/dL	Negative	MO
GLUCOSE, URINE	Negative mg/dL	Negative	MO
KETONE (ACETONE)	Negative mg/dL	Negative	MO
BILIRUBIN	Negative	Negative	MO
! OCCULT BLOOD	Negative	Negative	MO
UROBILINOGEN:	0.2 EU	0.1-1.0	MO
NITRITE	Negative	Negative	MO
! LEUCOCYTE	Negative	Negative	MO

Note: An exclamation mark (!) indicates a result that was not dispersed into the flowsheet.

Document Creation Date: 10/24/2012 1:01 AM

(1) Order result status: Final

Collection or observation date-time: 10/23/2012 14:11:00

Requested date-time: 10/23/2012 14:11

Receipt date-time: 10/23/2012 14:11

Reported date-time:

Referring Physician:

Ordering Physician: SELINA ZAMAN (26824)

Specimen Source:

Source: MMCLAB

Filler Order Number: 12-2703759-UA-0 GGGLAB

Lab site: 122703759

The following non-numeric lab results were dispersed to the flowsheet even though numeric results were expected:

GLUCOSE, URINE, Negative
KETONE (ACETONE), Negative

The following results were not dispersed to the flowsheet:

P081

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Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

OCCULT BLOOD, Negative, (F)
LEUCOCYTE, Negative, (F)

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Tel: 7189206266

Fax: 000-000-0000

Date: October 22, 2012

Name: Laura P POLANCO

Address:

1354 MERRIAM AVENUE
4C
BRONX, NY 10452

To Whom It May Concern:

This patient was seen in this office on : October 22, 2012
She needs further evaluation by Orthopedic before she goes to work.

If you need additional information, please feel free to contact our office.

Geny George, MD
Montefiore

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March 20, 2014

Page 1

Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

10/22/2012 - Office Visit: Internal Medicine visit - Initial visit

Provider: Selina Zaman, MD

Location of Care: Wakefield Ambulatory Care Center

Visit Type: Initial visit

CC: For letter.

History of Present Illness:

22 yr old female with no significant PMH came in requesting out of work letter.

She has been out of work for the last 2 weeks due to rib fracture. She says that she has been hit by the cop in the abdomen and has been in their custody for 2 days and then she went to the ER due to abdominal pain. In the ER xray rib series was done and it showed non displaced fracture of the anterior lateral left 8th rib. She was discharged from the ER with pain medications on the same day.

Pt complains that she still has left sided lower chest pain 5/ 10. non radiating, worsening with movement. She denies shortness of breath, abdominal pain, changes in bowel movement, nausea or vomiting.

Prescriptions:

TYLENOL 325 MG TABS (ACETAMINOPHEN) 2 by mouth every 4 hours as needed #30 x 0

Entered by: Geny George, MD

Authorized by: Selina Zaman, MD

Signed by: Selina Zaman, MD on 10/22/2012

Method used: Print then Give to Patient

RxID: 1666540890156890

NICOTINE 14 MG/24HR PT24 (NICOTINE) take one patch transdermally once daily #30 x 1

Entered by: Geny George, MD

Authorized by: Selina Zaman, MD

Signed by: Selina Zaman, MD on 10/22/2012

Method used: Print then Give to Patient

RxID: 1666540800156890

Orders Created Today

CBC, Plt, Auto Differential L [CBC]

Urinalysis [UA]

Basic Metabolic Panel J [CH7]

Liver Function J [LFT]

Lipid Profile J [LIP]

Gynecology []

Orthopedic []

HIV-1/2 AB (CIA) J [VQA]

Q2039 Fluarix Influenza, split, >= 3yrs, IM- Dx V04.81 [CPT-Q2039]

90471 imadm prq id subq/im njxs 1 vacc [CPT-90471]

99213 Ofc Vst, Est Level III [CPT-99213]

Past Medical History:

P084

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Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

none

Past Surgical History:

none

Family History:

Father had colon cancer at the age of 74.

Social History:

Lives alone.

Works in Fedex office.

Current Allergies:

No known allergies

Risk Factors:

Tobacco use: Current: smokes every day

Year started: 2011

Cigarettes: -- 1-2 pack(s) per day

Counseled to quit/cut down tobacco use: yes

Drug use: no

Alcohol use: yes

Type: occasional

Has patient --

Felt need to cut down: no

Been annoyed by complaints: no

Felt guilty about drinking: no

Needed eye opener in the morning: no

Seatbelt use: 100 %

Sun Exposure: occasionally

HIV Durable Consent and NYS DOH Guidance for HIV Consent printed and given to patient.

Fall screening:

Have you fallen in the last 3 month? no

Weight Screening

Any unexplained weight LOSS in the last 3 months? no

Any unexplained weight GAIN in the last 3 months? no

Abuse screening:

Is there a person in your life who is hurting, threatening or frightening you? no

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Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

PHQ-2 Depression screening

Over the past two weeks, how often have you been bothered by any of the following problems?

1. Little interest or pleasure in doing things: 0

2. Feeling down, depressed, or hopeless: 2

Total point score: 2

Review of Systems

General

Denies fever and anorexia.

Eyes

Denies blurring and irritation.

ENT

Denies earache and tinnitus.

CV

Denies chest pains and palpitations.

Resp

Denies dyspnea at rest and cough.

GI

Denies difficulty swallowing, nausea, vomiting, and change in bowel habits.

GU

Denies urinary burning and blood in urine.

MS

Denies joint pain / LOM and low back pain.

Vital Signs:

Patient Profile: 22 Years Old Female

Height: 69 inches (175.26 cm)

Weight: 136.00 pounds (61.82 kg)

(Measured Weight: 136lbs. 0oz.)

BMI: 20.16

Temp: 98 degrees F (36.67 degrees C) oral

Pulse rate: 66 / minute

Resp: 15 per minute

BP sitting: 130 / 84 (right arm)

Cuff size: regular

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Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

Pt. in pain? yes
Location: Ribs on left side
Intensity: 5
Type: aching

Vitals Entered By: Alexis Devol, ACA (October 22, 2012 1:51 PM)

Tobacco Use: Current: smokes every day

Physical Exam

General:

well developed, well nourished, in no acute distress

Head:

normocephalic and atraumatic

Eyes:

PERRL, EOMI, sclera WNL

Ears:

canals normal, TM's are normal, hearing grossly normal

Nose:

Grossly Normal

Mouth:

oropharynx clear without erythema, exudate, or tonsillar enlargement

Neck:

supple, no masses, trachea midline, thyroid normal, no adenopathy

Chest Wall:

symmetrical, no deformities, tenderness in left lower chest.

Lungs:

clear to auscultation; no crackles, rhonchi, or wheezing

Heart:

regular rate and rhythm with no murmurs, rubs or gallops

Abdomen:

normal bowel sounds, soft, non-distended without masses, organomegaly

Tenderness left upper quadrant.

Msk:

full range of motion, no synovitis or effusions.

Pulses:

pulses normal in all 4 extremities

Extremities:

no clubbing, cyanosis, edema, or deformity noted with full range of motion.

Neurologic:

Alert & oriented X 3, remainder grossly intact

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March 20, 2014

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Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

Impression & Recommendations:

Problem # 1: CIGARETT/TOBACCO USER (ICD-305.1)

counselled. Will give nicotine patches.

Her updated medication list for this problem includes:

Nicotine 14 Mg/24hr Pt24 (Nicotine) Take one patch transdermally once daily

Problem # 2: FRACTURE, RIB, LEFT (ICD-807.00)

will give pain medication and ortho referral for further evaluation.

Orders:

Orthopedic ()

Problem # 3: PHYSICAL EXAMINATION (ICD-V70.0)

Orders:

CBC, Plt, Auto Differential L (CBC)

Urinalysis (UA)

Basic Metabolic Panel J (CH7)

Liver Function J (LFT)

Lipid Profile J (LIP)

Gynecology ()

Medications Added to Medication List This Visit:

- 1) Nicotine 14 Mg/24hr Pt24 (Nicotine) Take one patch transdermally once daily
- 2) Tylenol 325 Mg Tabs (Acetaminophen) 2 by mouth every 4 hours as needed

Other Orders:

HIV-1/2 AB (CIA) J (VQA)

Q2039 Fluarix Influenza, split, >= 3yrs, IM- Dx V04.81 (CPT-Q2039)

90471 imadm prq id subq/im njxs 1 vacc (CPT-90471)

Osteoporosis Risk Assessment:

Risk Factors for Fracture or Low Bone Density:

Hx of Fractures: yes

Smoking status: Current: smokes every day

Immunization & Chemoprophylaxis:

Influenza vaccine: Fluarix (10/22/2012)

Current list of medications (including those ordered today):

- 1) NICOTINE 14 MG/24HR PT24 (NICOTINE) take one patch transdermally once daily
- 2) TYLENOL 325 MG TABS (ACETAMINOPHEN) 2 by mouth every 4 hours as needed

Montefiore

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March 20, 2014

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Chart Document

Laura P POLANCO

Female DOB:09/27/1990

MRN:03586426

Home: (347)536-1563

Patient Instructions:

Quitting smoking is the best single thing you can do for your health.

For help quitting, call 1-866-NY-QUITS or 311.

Make appointment in 2 weeks

.....Geny George, MD PGY-1 October 22, 2012 3:45 PM
Precepted by:Dr. Zaman.

OUTPATIENT PRIMARY CARE EXCEPTION:

I discussed the care of this patient with the resident providing the service, during or immediately after the patient's visit, and was directly responsible for the patient's management. I have assured that the services provided are appropriate, and I was immediately available to the patient should the need have arisen. My discussion with the resident included the patient's history, physical exam, laboratory findings, and medical decision making.

Immunization Orders:

Fluarix

Fluarix Immunization Committed #1

Flu vax: Fluarix

Flu vax Mfr: GlaxoSmithKline

Flu vax VIS: 7/2/12

Flu vax Rte: IM

Flu vax Dse: 0.5ml

Flu vax Lot: AFLUA706AA

Flu vax Exp: 06/30/2013

Flu vax Site: left deltoid

Flu vax By: Leseta Boyd, LPN

Vaccine Consent:

1. Do you have a history of severe allergic reactions to this vaccine? no
2. Any prior history of allergic reactions to egg and/or gelatin? no
3. Do you currently have an acute febrile illness? no
4. Have you ever had a severe reaction to latex? no

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- 5. Patient is moderately or severely ill? no
- 6. Vaccine information given and explained to patient? yes
- 7. Are you currently pregnant? no

Nursing Comments: Vaccine information given. Informed patient/guardian to call provider if elevated fever, rash or sever redness/swelling developes at injection site(s). Injection site care explained. Leseta Boyd, LPN October 22, 2012 4:31 PM

Electronically Signed by Selina Zaman, MD on 10/23/2012 at 12:49 PM
